Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Matthew	
		First name	First name
	Write the name that is on your government-issued picture identification (for	С	
		Middle name	Middle name
	example, your driver's	Asche	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
_	have used in the	First name	First name
	last 8 years		
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- 1049	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
	number (ITIN)		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 2 of 75

De	ebtor 1 Matthew	C Middle Nove	Asche	Case number (if known)	
	First Name	Middle Name	Last Name		
		About Debtor 1:		About Debtor 2 (Spouse Only	in a Joint Case):
4.	Any business names and Employer	I have not used any busines	ss names or EINs.	I have not used any business nam	es or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business name	
	last 8 years	Business name		Business name	
	Include trade names and doing business as names	EIN		EIN	
		EIN		EIN	
5.	Where you live			If Debtor 2 lives at a different addr	ess:
		2224 Oakridge Dr Apt 1 Number Street		Number Street	
		Aurora Illinois	60502		
		City State Du Page	Zip Code	City State	Zip Code
		County	in and from the one ob our	County	
		If your mailing address is diff fill it in here. Note that the court this mailing address.		If Debtor 2's mailing address is diffe in here. Note that the court will send ar address.	
		Number Street		Number Street	
		City State	Zip Code	- City State	Zip Code
6.	Why you are	Check one:		Check one:	
	choosing this district to file for	Over the last 180 days before lived in this district longer to	ore filing this petition, I have	Over the last 180 days before filinlived in this district longer than in	
	bankruptcy		lain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (S	•
				.	
				.	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 3 of 75

Der	otor 1 Matthew	C Asche Case number (if kno	wn)
Par	First Name Tell the Court Abo	Middle Name Last Name out Your Bankruptcy Case	
7. :	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342 B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13	P(b) for Individuals Filing for Bankruptcy (Form
	How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check court for more details about how you may pay. Typically, if you may pay with cash, cashier's check, or money order If your a on your behalf, your attorney may pay with a credit card or check. ✓ I need to pay the fee in installments. If you choose this option Individuals to Pay Your Filing Fee in Installments (Official Form 1) ✓ I request that my fee be waived (You may request this option By law, a judge may, but is not required to, waive your fee, and less than 150% of the official poverty line that applies to your fithe fee in installments). If you choose this option, you must fill Chapter 7 Filing Fee Waived (Official Form 103B) and file it with 	are paying the fee yourself, you attorney is submitting your payment ck with a pre-printed address. In, sign and attach the <i>Application for</i> 03A). Only if you are filing for Chapter 7. If may do so only if your income is amily size and you are unable to pay out the <i>Application to Have the</i>
ı	Have you filed for bankruptcy within the last 8 years?	✓ No. When MM / DD / YYYY District When MM / DD / YYYY District When MM / DD / YYYY	Case number Case number Case number
; ; ;	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor District When MM / DD / YYYY Debtor When MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
	Do you rent your residence?	 No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you and do you was long to line 12. ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> this bankruptcy petition. 	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 4 of 75

Debtor 1 Matthew		С		Asche	Case number (if known)		
First Name	_			Last Name			
Part 3: Report About Any	y Bus	inesse	es You Own as a S	iole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship		No. Yes.	Go to Part 4. Name and location of b Name of business, if an				_
is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number	Street		7-0-1-	_
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	e box to describe you siness (as defined in eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11	111 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B)) § 101(53A))	Zip Code	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	1 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in U.S.C. § 11 16(1)(B).					t of	
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	ter 11, but I am NOT	a small business debtor accor	ding to the definition in the	y Code.
Part 4: Report if You Ow	n or l	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs Im	mediate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and	✓		What is the hazard?				
identifiable hazard to public health or			If immediate attention is r	needed, why is it nee	ded?		
safety? Or do you own any property that needs immediate attention?		,	Where is the property?	Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 5 of 75

Debtor 1 Matthew Asche Case number (if known)

First Name Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 6 of 75

Debtor 1 Matthew	C Middle Name		se number (if known)				
First Name Part 6: Answer These Out	lestions for Reporting Purpo	Last Name					
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. paid that funds will be avai	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No.					
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,0 ☐ 50,001-100, ☐ More than 1	000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$	0 million	001-\$10 billion 0,001-\$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$	0 million	001-\$10 billion 0,001-\$50 billion			
Part 7: Sign Below							
For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Cha If no attorney represents me me fill out this document, I had I request relief in accordance I understand making a false so connection with a bankruptcy years, or both. 18 U.S.C. §§ 2 /s/ Matthew Asche Signature of Debtor 1 Executed on	Chapter 7, I am aware the States Code. I understand I did not pay or agreed ave obtained and read the with the chapter of title 1 statement, concealing processes can result in fines (152, 1341, 1519, and 357).	alty of perjury that the information at I may proceed, if eligible, under the relief available under each the to pay someone who is not an enotice required by 11 U.S.C. § 1, United States Code, specified perty, or obtaining money or property, or obtaining money or property to \$250,000, or imprisonment 1. Signature of Debtor 2 Executed on	der Chapter 7, h chapter, and I attorney to help 342(b). d in this petition. eperty by fraud in for up to 20			

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 7 of 75

Debtor 1	Matthew	С	Asche	Case number	(if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	er attorney, if represented are not ented by an y, you do not	eligibility to proceed ur the relief available und to the debtor(s) the no certify that I have no k petition is incorrect.	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, U which the person is S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
	file this page.	/s/ Mary E.R. Walte Signature of Attorney		Date	10/31/2016 MM / DD / YYYY
		Mary E.R. Walters Printed name Semrad Law Firm Firm name 1444 N. Farnsworth A Street Suite 300	venue		
		Aurora City		Illinois State	60505 Zip Code
		Contact phone	3129130625	Email address	mwalters@semradlaw.com
		6315822 Bar number		Illin	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 8 of 75

Fill in this information to identify your case:						
Debtor 1	Matthew	С	Asche			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
Case number (If known)			(State)			

Check if this is an
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$52,460.00
1c. Copy line 63, Total of all property on Schedule A/B	\$52,460.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$66,208.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$16,947.87
Your total liabilities	\$83,155.87
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,902.84
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,502.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 9 of 75

Deb	tor 1	Matthew	С	Asche	Case n	umber (if known)				
		First Name	Middle Name	Last Name						
Part	4:	Answer These Questions	for Administrat	ive and Statistical R	ecords					
6. A	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?									
		lo. You have nothing to report on the	his part of the form. C	heck this box and submit th	nis form to the co	urt with your other schedul	es.			
!	✓ Ye	es.								
7. V	/hat l	kind of debt do you have?								
[_	our debts are primarily consun amily, or household purpose. 11 U.								
[our debts are not primarily cornis form to the court with your othe		ave nothing to report on thi	s part of the form	a. Check this box and subm	it			
		n the <i>Statement of Your Currer</i> 122A-1 Line 11; OR , Form 122B	•	1	onthly income fro	m Official	\$4,979.85			
9.	Сор	by the following special categor	ries of claims from	Part 4, line 6 of Schedule	E/F:					
	Froi	m Part 4 on Schedule E/F, copy	y the following:			Total claim				
	9a. I	Domestic support obligations (Co	py line 6a.)			\$0.00				
	9b. 7	Taxes and certain other debts you	owe the government.	(Copy line 6b.)		\$0.00				
	9c. (Claims for death or personal injury	/ while you were intox	cicated. (Copy line 6c.)		\$0.00				
	9d. S	Student loans. (Copy line 6f.)				\$149.00				
		Obligations arising out of a separa	ation agreement or di	vorce that you did not repo	rt as	\$0.00				
	prio	rity claims. (Copy line 6g.)				#0.00				
	9f. D	Debts to pension or profit-sharing	plans, and other simi	lar debts. (Copy line 6h.)		\$0.00				
	9g. '	Total. Add lines 9a through 9f.			Ī	\$149.00				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 10 of 75

Fill in this in	formation to identify your cas	se:					
Debtor 1	Matthew	С		Asche			
	First Name	Middle N	lame	Last Name			
Debtor 2							
(Spouse, if t	filing) First Name	Middle N	lame	Last Name			
United State	es Bankruptcy Court for the:	Northern	Di	strict of Illinois			
		-		(State)			
Case numb If known)	er						
, ,	Form 106A/B						Check if this is an amended filing
Sched	ule A/B: Prope	erty					12
vrite your n	ame and case number (if k escribe Each Reside	nown). Answer evence, Building, I	ery question. Land, or O	ther Real Estate	You Own	s form. On the top of any a	, ,
<u> </u>	own or have any legal or ed No. Go to Part 2 Yes. Where is the property?	quitable interest in	any residen	ce, building, land, or s	ыншаг ргоре	enty :	
1.1	Street address, if available, o	r other description	Single-fa	property? Check all the mily home or multi-unit building	hat apply.	the amount of any secur	claims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property
-				inium or cooperative tured or mobile home		Current value of the entire property?	Current value of the portion you own?
1	Number Street			ent property		Describe the nature of interest (such as fee s	
-	City State	Zip Code	Timesha Other	re		the entireties, or a life	
		- ,	one. Debtor 1 Debtor 2 Debtor 1	•		Check if this is co (see instructions)	mmunity property
				mation you wish to ac entification number:	ld about this	s item, such as local	

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local

Who has an interest in the property? Check

What is the property? Check all that apply.

Duplex or multi-unit building

Condominium or cooperative

Manufactured or mobile home

Single-family home

Investment property

Land

Timeshare

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D*:

Creditors Who Have Claims Secured by Property.

Describe the nature of your ownership

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Check if this is community property

Current value of the

portion you own?

Current value of the

(see instructions)

entire property?

If you own or have more than one, list here:

Street

State

Street address, if available, or other description

Zip Code

1.2

Number

City

property identification number:

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 11 of 75

Debtor 1		C Middle News	Asche	_ Case number	(if known)	
1.3	et address, if available, or ot	Middle Name her description	Asche Last Name What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Debtor 1 only Debtor 2 only At least one of the debtors and another	oply. Check one.	Do not deduct secured cl the amount of any secure	d claims on Schedule D: ims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by estate), if known.
Part 2: Do you over the second of the second over the second	Describe Your Vehicle vn, lease, or have legal or at someone else drives. If yours, trucks, tractors, sport util	tion you own for a te that number her es equitable interest i u lease a vehicle, als	Other information you wish to add ab property identification number: all of your entries from Part 1, including the second of t	ng any entries	s for pages	
✓ Ye 3.1	Make Model: Year: Approximate mileage: Other information: 2016 Ford Mustang	Ford Mustang 2016 1000	Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this is community proinstructions)	nother	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? \$32010.00	
3.2	Make Model: Year: Approximate mileage: Other information: 2008 Ford Mustang	Ford Mustang 2008 43000	Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and are instructions)	nother	Do not deduct secured of the amount of any secure Creditors Who Have Clate Current value of the entire property? \$9300.00	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 12 of 75

Debtor 1	Matthew	С	Asche	Case number	(if known)	
	First Name	Middle Name	Last Name			
3.3	Make		Who has an interest in the pr	operty? Check		d claims or exemptions. Put
	Model:		one.			ured claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another		
			Check if this is communit	y property (see		
			instructions)			
3.4	Make		Who has an interest in the pr	operty? Check	Do not deduct secure	d claims or exemptions. Put
	Model:		one.		the amount of any sec	ured claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	e Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another		
			Check if this is communit	y property (see		
			instructions)			
4.1	Yes Make		Who has an interest in the pr	operty? Check		d claims or exemptions. Put
	Model:		one.			ured claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another		
			Check if this is communit	y property (see		
			instructions)			
4.2	Make		Who has an interest in the pr	operty? Check	Do not deduct secure	d claims or exemptions. Put
	Model:		one.		•	ured claims on Schedule D:
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?
			At least one of the debtors ar	nd another		
			Check if this is communit	y property (see		
			instructions)			
			of your entries from Part 2, inc			341310.00
you ha	ive attached for Part 2. Wri	te that number here		-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	PH 13 10.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 13 of 75

D	ebtor 1	Matthew		C Middle Norse	Asche	Case number (if known)	
_		First Name	/ D	Middle Name	Last Name		
			our Personal		interest in any of the f	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
			s and furnishings bliances, furniture,		henware		
✓	Yes. D	escribe	Furniture				\$300.00
	. Electi Examp No		s and radios; audi	o, video, stereo, a	and digital equipment; compute	rs, printers, scanners; music	
✓	Yes. D	escribe	Electronics				\$300.00
	Examp	•	and figurines; pair	• .	ther artwork; books, pictures, o er collections, memorabilia, co	•	
	Yes. D	escribe					
	Examp	les: Sports, ph	orts and hobbies notographic, exerci ks; carpentry tools;	se, and other hob	oby equipment; bicycles, pool ta nts	ables, golf clubs, skis; canoes	
	0. Fire a Examp		les, shotguns, ami	munition, and rela	ted equipment		
	Yes. D	escribe					
	1. Clot Examp		clothes, furs, leath	er coats, designe	r wear, shoes, accessories		
<u>√</u>		escribe	Clothes				\$250.00
	2. Jewe Examp	•		welry, engageme	nt rings, wedding rings, heirloc	om jewelry, watches, gems,	
✓	Yes. D	escribe	Jewelry				\$100.00
	Examp No	-farm animal les: Dogs, cat Describe	is s, birds, horses				
1	4. Any	other persor	nal and househol	d items you did	not already list, including ar	ny health aids you did not list	1
	No	-			·	- 	-
	Yes. D	escribe					
					rt 3, including any entries fo		\$950.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 14 of 75

Den	First Name	Middle Name	L oot Name	Case number (ii known)	
Part	First Name Pescribe Your	Financial Assets	Last Name		
		any legal or equitable int	erest in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No	e in your wallet, in your home, in a		n you file your petition Cash:	
17.	Examples: Checking, sa	avings, or other financial accounts, stitutions. If you have multiple acco		credit unions, brokerage houses,	
		17.1. Checking account:	Bank of America		\$1200.00
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks nvestment accounts with brokerage	e firms, money market accounts		
	✓ No Yes	Institution or issuer name:			
19.	Non-publicly traded s an LLC, partnership,	•	nted and unincorporated busine	-	- ,
	Yes. Give specific information about them	Name of entity		% of ownership:	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 15 of 75

Deb	tor 1	Matthew	С	Asche	Case number (if known)	
		First Name	Middle Name	Last Name		
20.		vernment and corporation of the				
			nts are those you cannot transfer			
	✓	No				
		Yes. Give specific				
		information about them	Issuer name:			
		u 16111				
21.		irement or pension				
	Exa		A, ERISA, Keogh, 401(k), 403(b)	, thrift savings accounts, o	or other pension or profit-sharing plans	
		No Yes. List each	Type of account:	Institution name:		
	Ľ	account	401(k) or similar plan:	401k through employer		\$9000.00
		separately.	Pension plan:			-
			IRA:			-
			Retirement account:			_
			Keogh:			_
			Additional account:			_
			Additional account:			_
22.		curity deposits and p		-		_
	You	r share of all unused o	leposits you have made so that yo vith landlords, prepaid rent, public	u may continue service or	use from a company ter) telecommunications	
		npanies, or others	viti idi idioido, propaid forti, public	dillines (ciconio, gas, wa	ner), telescrimanications	
	✓	No		Institution name:		
		Yes	Electric:			_
			Gas:			_
			Heating oil:			_
			Security deposit on rental unit:			_
			Prepaid rent:			_
			Telephone:			-
			Water:			_
			Rented furniture:			_
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to y	ou, either for life or for a n	number of years)	
		No	leaver name and description			
		Yes	Issuer name and description:			

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 16 of 75

Debte	or 1 Matthew First Name	C Middle N	lame	Asche Last Name	Case number (if known)	
24.	Interests in an		ount in a qualified		der a qualified state tuition program	
	✓ No ☐ Yes	nstitution name and descripti	ion. Separately file t	he records of any interes	ets.11 U.S.C. § 521(c):	
	-					
25.	Trusts, equitab exercisable for		roperty (other tha	n anything listed in lin	e 1), and rights or powers	
	✓ No					7
	Yes. Describ	De				
26.		ghts, trademarks, trade s et domain names, websites			ements	
	✓ No Yes. Describ	be				
27.	Licenses, franc	chises, and other general	intangibles			
	Examples: Buildi No	ng permits, exclusive licens	ses, cooperative as	sociation holdings, liquor	r licenses, professional licenses	
	Yes. Describ	be				
Mon	ney or proper	ty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or proper Tax refunds owe					portion you own?
						portion you own? Do not deduct secured
	Tax refunds owe	ed to you ecific information			Federal:	portion you own? Do not deduct secured
	Tax refunds owe ✓ No ☐ Yes. Give sp about th you alre	ed to you ecific information hem, including whether eady filed the returns			Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owe No Yes. Give sp about th you alre and the	ed to you ecific information hem, including whether				portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owe ✓ No ☐ Yes. Give sp about the you alree and the Family support Examples: Past defined the support of the s	ecific information hem, including whether eady filed the returns to tax years	ousal support, child	support, maintenance, di	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owe ✓ No Yes. Give speabout the your already and the support Examples: Past diese.	ect to you ecific information hem, including whether eady filed the returns e tax years	ousal support, child	support, maintenance, di	State: Local: vorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give speabout the your already and the support Examples: Past diese.	ecific information hem, including whether eady filed the returns to tax years	pusal support, child	support, maintenance, di	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owe ✓ No Yes. Give speabout the your already and the support Examples: Past diese.	ect to you ecific information hem, including whether eady filed the returns e tax years	pusal support, child	support, maintenance, di	State: Local: vorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give speabout the your already and the support Examples: Past diese.	ect to you ecific information hem, including whether eady filed the returns e tax years	pusal support, child	support, maintenance, di	State: Local: vorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owe ✓ No Yes. Give speabout the your alrest and the Family support Examples: Past dieses.	ect to you ecific information hem, including whether eady filed the returns e tax years	pusal support, child	support, maintenance, di	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owe ✓ No ☐ Yes. Give spabout the you alread the second the sec	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, spo ecific information	e payments, disabili	ty benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owe ✓ No ☐ Yes. Give spabout the spound of the second of	ed to you ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, spo ecific information	e payments, disabili	ty benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owe ✓ No ☐ Yes. Give spabout the you alread the second the sec	ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, spo ecific information	e payments, disabili	ty benefits, sick pay, vaca	State: Local: vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 17 of 75

Deb	otor 1 Matthew	С	Asche	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life	insurance; health say	vings account (HSA); credit, h	omeowner's, or renter's insurance	
	No	Com	pany name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance com of each policy and list its value		life through employer		\$0.00
32.	Any interest in property that is If you are the beneficiary of a living property because someone has die	trust, expect proceed		or are currently entitled to receive	
	✓ No				
	Yes. Describe				
33.	Claims against third parties, whe Examples: Accidents, employmen			demand for payment	
	✓ No				
	Yes. Describe				
34.	Other contingent and unliquidate to set off claims	ated claims of every	nature, including countered	laims of the debtor and rights	
	√ No				
	Yes. Describe				
35.	Any financial assets you did not	already list			
	✓ No				
	Yes. Describe				
36.	Add the dollar value of all of yo			. • .	\$10200.00
	for Part 4. Write that number he	ere		_	<u> </u>
Part	t5: Describe Any Busines	s-Related Prope	rty You Own or Have a	n Interest In. List any real estate	in Part 1.
37.			•		
	✓ No. Go to Part 6.	-			current value of the
	Yes. Go to line 38.			Ė	ortion you own? to not deduct secured claims r exemptions
38.	Accounts receivable or commis	sions you already ea	arned		Гелетриона
	✓ No				
	Yes. Describe				
30	Office equipment, furnishings,	and sunnlies			
JJ.			ems, printers, copiers, fax mac	hines, rugs, telephones, desks, chairs, electro	nic devices
	✓ No				
	Yes. Describe				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 18 of 75

Deb	tor 1	Matthew	C	Asche	Case number (if known)	
40.	Ma	First Name chinery fixtures ea	Middle Name	Last Name use in business, and tools of	f vour trade	
40.		No	uipinent, supplies you	use III business, and tools of	your trade	
	뇓	Yes. Describe				7
	ш	Too. Dosonbe				
44						
41.		entory				
	\mathbb{H}	No				1
	Ш	Yes. Describe				
		-				
42.		-	ips or joint ventures			
	$\mathbf{\Lambda}$	No		Name of entity:	% of ownership:	
		Yes. Give specific information about			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		them			·	_
						<u> </u>
43. (Cust	tomer lists, mailing	lists, or other compilat	ions		
	✓					
	Ш	Yes. Do your lists in	clude personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	An	y business-related p	property you did not alre	eady list		
	✓	No	. ,,	·		
	Ħ	Yes. Give specific				
		information				
						
				-		
45. A	dd t	he dollar value of a	II of your entries from P	art 5, including any entries fo	or pages you have attached	
Part	t 6:	Describe Any F	Farm- and Commer	cial Fishing-Related Pro	operty You Own or Have an Interes	t In.
46.	Do	you own or have a	ny legal or equitable int	erest in any farm- or comme	rcial fishing-related property?	
	✓	No. Go to Part 7.				Current value of the
		Yes. Go to line 47.				portion you own? Do not deduct secured
						claims
47	Fai	rm animals				or exemptions
		amples: Livestock, por	ultry, farm-raised fish			
	✓	No				
		Yes. Describe				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 19 of 75

Debt	or 1	Matthew	C Middle Nesses	Asche Last Name	Case number (if known)	
10	C=-	First Name	Middle Name	Last Name		
48.		ops-either growing or	narvesteu			
	Ш	Yes. Describe				
49.	Fai	m and fishing equipm	nent, implements, machinery, fix	tures, and tools of trad	e	
	~	No				
	Ħ	Yes. Describe				
	_					
50.	Fai	m and fishing supplie	s, chemicals, and feed			
	✓					
	Ш	Yes. Describe				
51.	An	y farm- and commerci	al fishing-related property you d	lid not already list		
	~	No				
	П	Yes. Describe				
					1	
			f your entries from Part 6, include			
ror Pa	art 6	. write that number ne	re			
		I				
Part			erty You Own or Have an		u Did Not List Above	
53.			rty of any kind you did not alrea ountry club membership	dy list?		
			odita y oldo mombolomp			
		No]
	Ш	Yes. Give specific information				
54 Δ	dd tl	he dollar value of all o	f your entries from Part 7. Write	that number here	•	
		no donar vardo er an e	your onlines from ture it thinks	that hambor horo minim	-	
		–				
Part	8:	List the lotals of	Each Part of this Form			
55. P	art	1: Total real estate, line	e 2		>	
56. p	art :	2 total vehicles, line 5		\$41310.00	<u></u>	
57. P	art 3	3: Total personal and h	nousehold items, line 15	\$950.00		
58. P	art 4	l: Total financial asset	s, line 36	\$10200.00		
59. P	art	5: Total business-rela	ted property, line 45			
60. P	art	6: Total farm- and fish	ing-related property, line 52		_	
61. F	art	7: Total other property	not listed, line 54		_	
62. T	otal	personal property. Ac	ld lines 56 through 61	\$52460.00		+ \$52460.00
				ψο2-του.ου	Copy personal property total ►	- ψυΖπου.ου
						\$52460.00
63. T c	otal	of all property on Sch	edule A/B. Add line 55 + line 62			Ψ02-100.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 20 of 75

Fill in this information to identify your case:					
Debtor 1	Matthew	С	Asche		
	First Name	Middle Name	Last Name	-	
Debtor 2					
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Furniture Line from Schedule A/B: 06	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
	Brief description: Clothes Line from Schedule A/B: 11	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes	3 years after that for ca					

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 21 of 75

btor 1 Matthew	С	Asche	Case number (if known)	
First Name	Middle Name	Last Name		
t 2: Additional Page				
Brief description of the property ar line on Schedule A/B that lists this property			xemption you claim ox for each exemption.	Specific laws that allow exemption
Brief description:	\$300.00	V		735 ILCS 5/12-1001(b)
Electronics			\$300.00	_
Line from Schedule A/B: 07		100% of fair mapplicable sta	narket value, up to any atutory limit	
Brief				735 ILCS 5/12-1001(b)
description:	\$100.00	✓	\$100.00	
Jewelry		100% of fair m	narket value, up to any	-
Line from Schedule A/B: 12		applicable sta		
Brief				735 ILCS 5/12-1001(b)
description:	\$1,200.00	✓	\$1,200.00	
Bank of America		100% of fair m	narket value, up to any	_
Line from Schedule A/B: 17		applicable sta	atutory limit	
Brief	\$32,010.00			735 ILCS 5/12-1001(c)
description:	φ32,010.00	✓	\$0	_
Ford Mustang, 2016, 2016 Ford Mustang			narket value, up to any	
Line from		applicable sta	itutory limit	
Schedule A/B: 03 Brief				725 00 5/42 704
description:	\$9,000.00	~		735 ILCS 5/12-704
401k through employer			\$9,000.00	_
Line from		100% of fair mapplicable sta	narket value, up to any	
Schedule A/B: 21		applicable sta	itatory iirriit	
Brief	Ф0.00			735 ILCS 5/12-1001(f)
description:	\$0.00	<u> </u>	\$0	_
Term life through employer		100% of fair m	narket value, up to any	_
Line from		applicable sta	tutory limit	
Schodulo A/P: 31				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 22 of 75

Fill in	this informa	ation to identify your case	:				
Debto	or 1	Matthew	С	Asche			
Dobito	, i	First Name	Middle Name	Last Name			
Debto		First Name	Middle Name	Last Name			
		ankruptcy Court for the:	Northern	District of Illinois			
Office	u States Da	ankrupicy Court for the.	Notthern	(State)			
Case (If kno	number wn)						
Offi	icial F	orm 106D			•		Check if this is a amended filing
Scl	hedu	le D: Credit	ors Who Ha	ve Claims Secur	ed by Pro		12/1
Be as space and ca	complete is needed ase number Do any cre	and accurate as possib l, copy the Additional Pa er (if known). editors have claims secu	le. If two married people age, fill it out, number the red by your property?	are filing together, both are equal e entries, and attach it to this form are other schedules. You have nothing	ly responsible for si n. On the top of any	upplying correct infor additional pages, writ	
Part 1		All Secured Claims					
2.	List all se for each c	cured claims. If a credito laim. If more than one cre		ed claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	FORD MO	OTOR CREDIT	Describe the property t	hat secures the claim:	\$48,502.00	\$32,010.00	\$16,492.00
	OMAHA City Who owe Debto At lea anoth Chec to a c Date debt incurred	Nebraska 68154 State ZIP Code es the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and er k if this claim relates community debt t was 9/1/2016	Contingent Unliquidated Disputed Nature of lien. Check al An agreement you m car loan)	nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)			
2.2		merica, NA	Describe the property t	hat secures the claim:	\$17,706.00	\$9,300.00	\$8,406.00
	P.O. Box Numbe	15026 If Street	072 Automobile As of the date you file, Contingent	the claim is: Check all that apply.			
	City Who owe	State ZIP Code es the debt? Check one. or 1 only	Unliquidated Disputed Nature of lien. Check al	I that apply.			
	Debto	or 2 only or 1 and Debtor 2 only st one of the debtors and	car loan)	nade (such as mortgage or secured as tax lien, mechanic's lien)			
		k if this claim relates community debt t was <u>5/1/2015</u>	Other (including a rig				
		Add the dollar value of y	your entries in Column A	on this page. Write that	\$66,208.00		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 23 of 75

Filli	n this inform	ation to identify your case	:						
Deb	tor 1	Matthew	С	Asche					
		First Name	Middle Name	Last Name					
	tor 2	Tiret Name	Mistalla Nassa	Last Name					
(Зрс	ouse, ii iiiiiig) First Name	Middle Name	Last Name					
Unit	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois					
Cas	e number			(State)					
	nown)	_							
Off	icial F	orm 106E/F			<u>.</u>	Cł	neck if this is a	n amended filing	
80	hodu	Jo E/E: Cro	ditare Wha	Have Unseco	urad Claime				
<u> </u>	neau	ile E/F. Cre	ultors willo	nave Unsect	ureu Ciaims			12/15	
party 106A that a	to any exe /B) and on are listed in es in the bo	cutory contracts or une Schedule G: Executory Schedule D: Creditors	xpired leases that could r Contracts and Unexpired Who Hold Claims Secur	rs with PRIORITY claims ar result in a claim. Also list end Leases (Official Form 106 and by Property. If more spithis page. On the top of an analysis with the spithis page.	Recutory contracts on <i>Sch</i> G). Do not include any creace is needed, copy the Pa	nedule A/E editors wit art you ne	B: Property (O h partially sed ed, fill it out, i	Official Form cured claims number the	
Part	1: List A	All of Your PRIORIT	Y Unsecured Claims	3					
1.	Do any cre	editors have priority uns	secured claims against yo	ou?					
	✓ No. G	o to Part 2.							
	Yes.								
2.	listed, ident much as po Continuation	tify what type of claim it is. ossible, list the claims in al on Page of Part 1. If more	If a claim has both priority a lphabetical order according than one creditor holds a p						
			·		,				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 24 of 75

Debto		ssche Case number (if known)	
Part 2	List All of Your NONPRIORITY Unsecured Clain	ns	
3. I	Do any creditors have nonpriority unsecured claims against ye	ou?	
1	No. You have nothing to report in this part. Submit this form to the	he court with your other schedules.	
	✓ Yes.		
4.	 List all of your nonpriority unsecured claims in the alphabetic	al order of the creditor who holds each claim. If a creditor has more	than one priority
		h claim listed, identify what type of claim it is. Do not list claims already in	
	•	tors in Part 3.If you have more than four priority unsecured claims fill out	the Continuation
I	Page of Part 2.		
			Total claim
4.1	American Family Insurance Group	Last 4 digits of account number	\$7,260.87
	Nonpriority Creditor's Name 6000 American Parkway	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Madison Wisconsin 53777	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify judgment 10 SR 1837	
	✓ No		
	Yes		
4.2	AT&t Uverse	Lost 4 digita of account number	\$125.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	PO Box 64794 Number Street	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Saint Paul Minnesota 55164	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	<u>~</u>	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify <u>uverse</u>	
	✓ No		
	Yes		
4.3	Bank of America, NA		\$2,024,00
4.3	Nonpriority Creditor's Name	Last 4 digits of account number	\$2,031.00
	P.O. Box 15026	When was the debt incurred? 9/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Wilmington Delaware 19801	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	븜	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No		
	Yes		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 25 of 75

Debto		Asche Case number (if known)ast Name	
Part 2	Your NONPRIORITY Unsecured Claims - Conti	nuation Page	
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.4	Bank of America, NA	Last 4 digits of account number 5906	\$0.00
	Nonpriority Creditor's Name P.O. Box 15026		
	Number Street	When was the debt incurred? 9/1/2014	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Wilmington Delaware 19801	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	-	that you did not report as priority claims	
	At least one of the debtors and another Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No	_	
	Yes		
4.5	Bank of America, NA		\$0.00
4.5	Nonpriority Creditor's Name	Last 4 digits of account number 2318	φυ.υυ
	P.O. Box 15026 Number Street	When was the debt incurred? 7/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Wileday Delayers 40004	Contingent	
	Wilmington Delaware 19801 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify 060 Automobile	
	✓ No		
	Yes		
4.6	Bank of America, NA Nonpriority Creditor's Name	Last 4 digits of account number1464	\$0.00
	P.O. Box 15026	When was the debt incurred? 8/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Wilmington Delaware 19801	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	No	✓ Other. Specify 072 Automobile	
	Yes		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 26 of 75

Debto		Asche Case number (if known)			
	First Name Middle Name	Last Name			
Part 2	Your NONPRIORITY Unsecured Claims - Cont	inuation Page			
	After listing any entries on this page, number them beginn	ing with 4.5. followed by 4.6. and so forth.	Total claim		
4.7	CAPITAL ONE		\$0.00		
4.7	Nonpriority Creditor's Name	Last 4 digits of account number 0086	φυ.υυ		
	11013 W BROAD ST	When was the debt incurred? 12/1/2015			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	CLENALIEN Virginia 22060	Unliquidated			
	GLEN ALLEN Virginia 23060 City State Zip Code	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	At least one of the debtors and another				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>			
	▼ No	—			
	Yes				
4.8	CAPITAL ONE BANK (USA), N.A.		\$831.00		
4.0	Nonpriority Creditor's Name	— Last 4 digits of account number	φοσ1.00		
	PO BOX 85520 Number Street	When was the debt incurred? 12/1/2015			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	RICHMOND Virginia 23285 City State Zip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Ä			
	Debtor 1 and Debtor 2 only	Student loans			
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar			
	Is the claim subject to offset?	debts			
	▼ No	✓ Other. Specify <u>CreditCard</u>			
	Yes				
4.9	CHASE CARD		\$5,183.00		
4.5	Nonpriority Creditor's Name	Last 4 digits of account number 2189	φ5,165.00		
	PO BOX 15298 Number Street	When was the debt incurred? 7/1/2015			
	Number Street	As of the date you file, the claim is: Check all that apply.			
	NAME AND COLORS	Contingent			
	WILMINGTON Delaware 19850 City State Zip Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	Debtor 2 only	Student loans			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar			
	Is the claim subject to offset?	debts			
	✓ No	Other. Specify CreditCard			
	Yes				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 27 of 75

Debtor		Asche Case number (if known)	
Dowt O			
Part 2:			
	After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.10	CHASE CARD Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	PO BOX 15298	When was the debt incurred? 7/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	MILIMINICTON Deleviere 40050	Unliquidated	
	WILMINGTON Delaware 19850 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only		
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No		
	Yes		
4.11	FIRSTSOURCE ADVANTAGE	Last 4 digits of account number 2822	\$0.00
	Nonpriority Creditor's Name 1232 W STATE RD #2	When was the debt incurred? 3/1/2011	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	LA PORTE Indiana 46350	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	片	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
	=	ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA	
	Yes	Stilet. Specify WEDIONET ATMENT DATA	
4.12	Illinois Secretary of State Safety and Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	2701 S Dirksen Pkwy	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	-	Contingent	
	Open of field III and Co. 2020	Unliquidated	
	Springfield Illinois 62723 City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	•	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other Specify 10 SR 1937 Dungge Colludgment	
	Is the claim subject to offset?	✓ Other. Specify 10 SR 1837 Dupage Co judgment	
	✓ No		
	Yes		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 28 of 75

Debtor		sche Case number (if known)	
	First Name Middle Name La	sst Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Contin	nuation Page	
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.13	JARED Nonpriority Creditor's Name	Last 4 digits of account number 0562	\$0.00
	375 Ghent Road	When was the debt incurred? 5/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Al. 01: 44000	Contingent	
	Akron Ohio 44333 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No ☐ Yes	_	
4.14	JARED-GALLERIA OF JWLR	Look 4 dimits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 3680	 Last 4 digits of account number When was the debt incurred? 5/1/2016 	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Akron Ohio 44309 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	── debts ✓ Other. Specify CreditCard	
	✓ No		
4.15	MERCHANTS CR		\$0.00
4.13	Nonpriority Creditor's Name	— Last 4 digits of account number 3147	φυ.υυ
	223 W JACKSON ST SUITE 900 Number Street	When was the debt incurred?9/1/2012	
		As of the date you file, the claim is: Check all that apply. Contingent	
	CHICAGO Illinois 60606 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts 001 Collection: Collecting for	
	✓ No	001 Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify MEDICAL	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 29 of 75

Debtor		Asche Case number (if known)	
		Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Conti	inuation Page	
	After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.16	MOHELA/DEPT OF ED	Last 4 digits of account number 0002	\$122.00
	Nonpriority Creditor's Name 633 SPIRIT DR	When was the debt incurred? 1/1/2001	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	CHESTERFIELD Montana 63005	H	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Other. Specify	
	✓ No	Other. Specify	
	Yes		
4.17	MOHELA/DEPT OF ED	Last 4 digits of account number 0001	\$27.00
	Nonpriority Creditor's Name 633 SPIRIT DR	When was the debt incurred? 1/1/2001	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	CHESTERFIELD Montana 63005	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Other. Specify	
	✓ No	Curior. Specify	
	Yes		
4.18	ONEADVANTAGE Nonpriority Creditor's Name	Last 4 digits of account number 0379	\$0.00
	7650 Magna Drive	When was the debt incurred? 12/1/2011	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Belleville Illinois 62223 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts 001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR:	
	Yes	Other. Specify <u>MEDICAL</u>	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 30 of 75

Debtor		Asche Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Con	tinuation Page	
	After listing any entries on this page, number them begin	ning with 4.5, followed by 4.6, and so forth.	Total claim
4.19	SYNCB/CARCARE ONE	g,,,	
4.19	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	C/O PO BÓX 965036	When was the debt incurred? 7/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	ORLANDO Florida 32896	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	No		
	=		
	Yes		
4.20	SYNCB/CCARE1	Last 4 digits of account number 0632	\$1,368.00
	Nonpriority Creditor's Name C/O PO BOX 965036	When was the debt incurred? 7/1/2015	
	Number Street	<u></u>	
		As of the date you file, the claim is: Check all that apply.	
	Orlando Florida 32896	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No	Outsile Speeding	
	Yes		
4.21	US Dept. of Education	Last 4 digits of account number 0949	\$0.00
· · · · · · · · · · · · · · · · · · ·	Nonpriority Creditor's Name		
	PO BOX 5609 Number Street	When was the debt incurred? 1/1/2001	
		As of the date you file, the claim is: Check all that apply.	
	CDEENI/ILLE Toyon 75402	Contingent	
	GREENVILLE Texas 75403 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Other. Specify	
	Yes		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 31 of 75

Debtor	1 Matthew C	Asche Case number (if known)	
	First Name Middle Name	Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Con	ntinuation Page	
r art z.			Total slabo
	After listing any entries on this page, number them begin	nning with 4.5, followed by 4.6, and so forth.	Total claim
4.22	US Dept. of Education	Last 4 digits of account number 1049	\$0.00
	Nonpriority Creditor's Name PO BOX 5609	When was the debt incurred? 1/1/2001	
	Number Street	when was the dept incurred:	
		As of the date you file, the claim is: Check all that apply.	
	ODEENWILLE Tours 75400	Contingent	
	GREENVILLE Texas 75403 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	님	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		
4.23	US Dept. of Education	Last 4 digits of account number 0491	\$0.00
	Nonpriority Creditor's Name		
	PO BOX 5609 Number Street	When was the debt incurred? 1/1/2001	
	Trumbol Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	GREENVILLE Texas 75403 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	<u>'</u>	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No	Other. opening	
	Yes		
4.24	WFDS	Lead A Paris of a county work on the AMO	\$0.00
بنست	Nonpriority Creditor's Name	Last 4 digits of account number1496	Ψ0.00
	PO BOX 19657	When was the debt incurred? 10/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	IRVINE California 92623	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	└	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Other Specify 072 Automobile	
	✓ No	✓ Other. Specify 072 Automobile	

Yes

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 32 of 75

bioi i <u>Mailiew</u>		C	ASCITE	Cas	e number (# known)
First Name		Middle Name	Last Name		
tt 3: List Others	to Be Notified	About a Debt	That You Already	/ Listed	
collection agency agency here. Simi	is trying to collectilarly, if you have m	t from you for a de ore than one cred	ebt you owe to some litor for any of the de	one else, list the ebts that you liste	you already listed in Parts 1 or 2. For example, if a original creditor in Parts 1 or 2, then list the collection ed in Parts 1 or 2, list the additional creditors here. If out or submit this page.
Illinois Secretary of Name	of State Safety and F	inancial	On which en	try in Part 1 or Pa	art 2 did you list the original creditor?
2701 S Dirksen Pk	wy		Line 4.1	of (Check	Part 1: Creditors with Priority Unsecured Claims
Number Stree	t			one):	Part 2: Creditors with Nonpriority Unsecured Claims
Springfield	Illinois	62723	Last 4 digits	of account num	ber
City	State	Zip Code			

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 33 of 75

Matthew Debtor 1 Asche Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$149.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$16,798.87 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$16,947.87 6j. Total. Add lines 6f through 6i. 6j.

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 34 of 75

Fill in this information to identify your case:					
Debtor 1	Matthew	С	Asche		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if fill	ing) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)	·				

Official Form 106G

Check if this is ar						
amended filing						

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compan	y with whom you have th	ne contract or lease	State what the contract or lease is for		
2.1	RMK Management Name			Residential Lease, Debtor is Lessee, year to year residential lease		
	1 N Franklin St Ste 70	00				
	Number	Street				
	Chicago	Illinois	60606			
	City	State	Zip Code			

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 35 of 75

Ellin de la la Car	and the state of the same			
Fili in this infor	mation to identify your cas	e:		
Debtor 1	Matthew	С	Asche	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	IG) First Name	Middle None	LastNama	
(Opouse, ii iiii	9) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	
(If known)	-			
				 Check if this is an
				amended filing
Official	Form 106H			
Schedu	le H: Your Co	odebtors		12/15
✓ No Yes	, , ,	0 ,	not list either spouse as a cod	
	•	lived in a community propico, Puerto Rico, Texas, Wa	• (mmunity property states and territories include Arizona, California,
	Go to line 3.	,,,,	ormigion, and recommy	
Yes.	Did your spouse, former s	pouse, or legal equivalent liv	ve with you at the time?	
	No			
	Yes. In which community	state or territory did you live?	Fill in	the name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equiv	valent	_
	Number Street			_
	City	State	Zip Code	_
	•	•	•	our spouse is filing with you. List the person shown in line 2 e listed the creditor on <i>Schedule D</i> (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 36 of 75

Fill in this	information to identif	y your case:						
Debtor 1	Matthew	C	Asche		_			
Daletano	First Name	Middle Name	Last Name)		Check if this is:		
Debtor 2 (Spouse, if fi	iling) First Name	Middle Name	Last Name	<u> </u>	-	An amended filing		
							wing post-petition chapter	
United State	s Bankruptcy Court for the:	Northern	District of Illinois (State		-	expenses as of the		
Case number	er		(Oldio	,	_			
(If known)						MM / DD / YYYY		
Official	l Form 106I							
Sched	ule I: Your Ind	come					12/1	
	Describe Employme	ame and case numbe	i (ii kilowii). Al	iswer eve	ry question			
	Fill in your employment nformation.		Debtor 1		Debtor 2			
		Employment status	✓ Employed			Employed		
	f you have more than one ob,		Not Employed			Not Employed		
a ir	attach a separate page with information about additional	Occupation	Maintenance s	upervisor				
	employers.	Employer's name	RMK Manager	ment			_	
	nclude part time, seasonal,	Employer's address	1 N Franklin St Ste 700					
or self-employed work.			Number Street			Number Street		
	Occupation may include student							
0	or homemaker, if it applies.		Chicago	Illinois	60606			
			City	State	Zip Code	City	State Zip Code	
		How long employed there?	3 years 11 mon	ths				
Estimate n	parated.	Monthly Income date you file this form. If your than one employer, comb	_			,		
	parate sheet to this form.	ore aran one employer, comb	nio ilionilauoti i		ebtor 1	For Debtor 2 or		
0 11-4						non-filing spouse		
		ry, and commissions (befo alculate what the monthly wag			\$4,368.52		<u></u>	
3 Fetim	nate and list monthly over	timo nav	3.		+ \$0.00			

Official Form 106I Schedule I: Your Income page 1

\$4,368.52

4. Calculate gross income. Add line 2 + line 3.

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 37 of 75

Debio	First Name	Middle Name	Lost Nome	Case number (ir known)	· · · · · · · · · · · · · · · · · · ·
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here		→ 4.	\$4,368.52		
5. List	all payroll deduc					
5a.	Tax, Medicare, a	nd Social Security deductions	5a	\$940.90		
5b.	Mandatory cont	ributions for retirement plans	5b	\$0.00		
5c.	Voluntary contri	ibutions for retirement plans	5c	\$339.95		
5d.	Required repay	ments of retirement fund loans	5d	\$0.00		
5e.	Insurance		5e	\$184.84		
5f. I	Domestic suppo	ort obligations	5f	\$0.00		
5g.	Union dues		5g	\$0.00		
5h.	Other deduction	ns. Specify:	_ 5h. +	\$0.00 +		
6. Add +5h.	the payroll ded	uctions. Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6	\$1,465.69		
7. Calc	culate total mont	hly take-home pay. Subtract line 6 from line 4	4. 7. <u> </u>	\$2,902.84		
8. List	all other income	regularly received:				
	business, profe	•				
		nt for each property and business showing gros and necessary business expenses, and the tot le.		\$0.00		
8b.	Interest and div	idends	8b	\$0.00		
	Family support dependent regu	payments that you, a non-filing spouse, or larly receive	а			
		pousal support, child support, maintenance, t, and property settlement.	8c	\$0.00		
8d.	Unemployment	compensation	8d	\$0.00		
8e.	Social Security		8e	\$0.00		
 	Include cash assis assistance that you the Supplemental subsidies	nt assistance that you regularly receive tance and the value (if known) of any non-cash u receive, such as food stamps (benefits under Nutrition Assistance Program) or housing		\$0.00		
	Specify: Pension or retir	amont income	8f	\$0.00 \$0.00		
·		ncome. Specify:	8g 8h. +	\$0.00 +		
				\$0.00		
9. Add	an other income	e Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9. <u> </u>	\$0.00		
		ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing spo	10	\$2,902.84 +	=	\$2,902.84
Incl rela	lude contributions atives.	lar contributions to the expenses that you from an unmarried partner, members of your ho mounts already included in lines 2-10 or amount	ousehold, your deper	ndents, your roommates	•	
Spe	ecify:				11	. +\$0.00
		the last column of line 10 to the amount in				2. \$2,902.84
V V I I	to a fact al ribuilt Off	and Sammary of Contodulos and Classical Cum	and y or Cortain Liab	mass and related Data,	п к арриоо	Combined monthly income
13. Do	you expect an ir	ncrease or decrease within the year after yo	ou file this form?			,
	Yes. Explain:					

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 38 of 75

Fill in this infor	mation to identify your c	ase:				
Debtor 1	Matthew	С	Asche			
	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filing	g	
United States I	Bankruptcy Court for the	: Northern	District of Illinois		owing post-petition chapte	r 13
Case number			(State)	expenses as of th	e following date:	
(If known)				MM / DD / YYYY	,	
Official	Form 106J					
-	le J: Your E	xpenses				12/15
		-	e filing together, both are equally i	esnonsible for supply	ving correct	
information. If			form. On the top of any additional			
	cribe Your House	hold				
1. Is this a joi		iioiu				
	to line 2					
	oes Debtor 2 live in a	senarate household?				
1cs. D	_	separate nousenoia:				
_ L	No					
	Yes. Debtor 2 must	file Official Forms 106J-2, Expens	ses for Separate Household of Debto	r2.		
2. Do you hav		No				
Do not list D Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
3. Do your ex	penses include					
	of people other	No				
than yourself an	d your \square	Yes				
dependent	s?					
Part 2: Esti	mate Your Ongoin	g Monthly Expenses				
Estimate you	r expenses as of your	bankruptcy filing date unless y	ou are using this form as a supp	ement in a Chapter 13	3 case to report	
_	of a date after the ban		plemental Schedule J, check the	•	-	
Include expe	nses paid for with non	-cash government assistance	if you know the value of			
such assistar	nce and have included	d it on Schedule I: Your Income	e (Official Form B 106l.)		Your expen	ises
	or home ownership ear the ground or lot. 4.	xpenses for your residence. Ind	clude first mortgage payments and		4.	\$0.00
If not inc	luded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or ren	ter's insurance			4b	\$0.00
4c. Home	maintenance, repair, and	d upkeep expenses			4c.	\$0.00
4d. Home	owner's association or c	ondominium dues			4d.	\$0.00

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 39 of 75

Debtor 1 Matthew

<u>Asche</u> Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$189.00 6a. 6b. Water, sewer, garbage collection \$80.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$290.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$380.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$90.00 10. Personal care products and services \$80.00 10. 11. Medical and dental expenses \$71.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$260.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$172.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$890.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 40 of 75

Debtor 1	Matthew	С	Asche	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly expenses	S.				\$2,502.00
22a. <i>A</i>	add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly expense	s for Debtor 2), if any, fro	m Official Form 106J-2			\$2,502.00
22c. A	dd line 22a and 22b. The resu	It is your monthly expens	ses.		22.	
23.Calcu	late your monthly net incon	ne.				
23a. C	Copy line 12 (your combined m	onthly income) from Sch	edule I.		23a	\$2,902.84
23b. C	Copy your monthly expenses fro	om line 22 above.			23b	\$2,502.00
23c. S	Subtract your monthly expenses	s from your monthly inco	me.			\$400.84
	The result is your monthly net	income.			23c	
24. Do vo	ou expect an increase or de	crease in vour expens	es within the vear after vou	ı file this form?		
	•					
	example, do you expect to finis gage payment to increase or c					
	No		•			
Ш'	⁄es					
	Explain here:					

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 41 of 75

Fill in this information to identify your case:								
Debtor 1	Matthew	С	Asche	_				
	First Name	Middle Name	Last Name	=				
Debtor 2								
(Spouse, if filing	ng) First Name	Middle Name	Last Name	_				
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	_				
Case number (If known)			(State)	-				

Official Form 106Dec

Г	Check if this is an
	amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	nelp you fill out bankruptcy forms?
	☑ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	nd schedules filed with this declaration and
	·	
X	/s/ Matthew Asche	x
	Signature of Debtor 1	Signature of Debtor 2
	Date 10/31/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 42 of 75

Debtor 1	Matthew	С	Asche
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fili	^{ng)} First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern	District of Illinois
Case number			(State)

Check if this is ar
amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: G	ive Details A	About Your	Marital Statu	s and	Where You Live	d Before			
1.		at is your curre Married Not married	nt marital sta	itus?						
2.	Duri	ing the last 3 ye				nan where you live r				
		Debtor 1:			Dates there	Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived there
		040 0	-:				Same as D	ebtor 1		Same as Debtor 1
		816 Greenwood Number Street	circle #308		From	om 11/2015 Number Street				From
					То	08/2016				То
		Naperville	Illinois	60563			0::	O: :		
	_	City	State	Zip Code			City Same as D	State ebtor 1	Zip Code	Same as Debtor 1
		816 Greenwood Number Street	Circle #312		From To	07/2014 11/2015	Number Street			From To
		Naperville	Illinois	60563						
		City	State	Zip Code			City	State	Zip Code	
3.	territor	ries include Arizo o	na, California	, Idaho, Louisiana,	Nevada	legal equivalent in a a, New Mexico, Puerto official Form 106H).			- ,	mmunity property states and

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 43 of 75

ebtor 1	Matthew C First Name Middle	Asche Name Last Nar		number (if known)	
art 2:	Explain the Sources of Your				
. Did Fill i	you have any income from employmenthe total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	nent or from operating a builted from all jobs and all busine	sses, including part-time		ears?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$47196.32	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
	or last calendar year: anuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$50193.62	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
	or the calendar year before that: anuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	\$57289.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
bene case List e	de income regardless of whether that inc fit payments; pensions; rental income; ir and you have income that you received each source and the gross income from No Yes. Fill in the details.	nterest; dividends; money colle together, list it only once unde	ected from lawsuits; royalties r Debtor 1.	; and gambling and lottery wini	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	rom January 1 of current year until he date you filed for bankruptcy:				
	For last calendar year: January 1 to December 31, 2015) YYYY				
	For the calendar year before that: January 1 to December 31, 2014 YYYY				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 44 of 75

	Matthew First Name		Middle Name	Asche Last Name	Case num	oer (if known)	
3: I	_ist Certain	Payments Y	ou Made Be	efore You Filed for	r Bankruptcy		
a	ithau Dahtau 11	o or Dobtor 2lo	alahta mulmasu	ilu aanaumar dahta?			
_				ily consumer debts?			
_ N		a personal, fam			. Consumer debts are defined	in 11 U.S.C. § 101(8) as "inc	urred by an individual
	During the 9	0 days before y	ou filed for bank	kruptcy, did you pay any d	creditor a total of \$6,425* or me	ore?	
	No. Go	to line 7.					
	to	otal amount you	paid that credit	or. Do not include payme	25* or more in one or more pay ents for domestic support obliq to an attorney for this bankrup	ations, such as	
	* Subject to	adjustment on 4	/01/19 and eve	ry 3 years after that for ca	ases filed on or after the date o	of adjustment.	
/ Y	es. Debtor 1 o	Debtor 2 or b	oth have prim	narily consumer debts	•		
	During the 9	0 days before y	ou filed for bank	kruptcy, did you pay any d	creditor a total of \$600 or more	?	
	✓ No. Go	to line 7.					
	th	nat creditor. Do	not include pay	ments for domestic supp ments to an attorney for		support and	Man thin no wood
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
_	Creditor's Name)					Mortgage
_	Number Street						Car Credit card
_							Loan repayment
(City	State 2	Zip Code				Suppliers or vendors
							Other
C	Creditor's Name	;					Mortgage
<u> </u>	Number Street						Car Credit card
_							Loan repayment
-	City	State Z	Zip Code				Suppliers or
	лц	Ciale 2	ip Oode				vendors Other
-	Creditor's Name	;	_				Mortgage
_							Car
ľ	Number Street						Credit card Loan repayment
_							Suppliers or
C	City	State Z	Zip Code				vendors
							Othor

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 45 of 75

Debtor 1	Matthew First Name	C Middle Name		sche st Name	Case number (if known)
Insid corp ager	ders include your relations of which you	ousiness you operate as a	relatives of any rson in control, o	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	
✓	No Yes. List all payments	to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name		_			
	Number Street					
_	City Stat	te Zip Code				
	Insider's Name					
	Number Street					
	City Star	te Zip Code				
insid Inclu	der? de payments on debts No	guaranteed or cosigned b		payments or trans	fer any property o	n account of a debt that benefited an
Ц	Yes. List all payments	that benefited an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name					
	Number Street					
_	City Stat	te Zip Code				
	Insider's Name					
	Number Street					
	City Stat	te Zip Code				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 46 of 75

Deb	tor 1	Matthew First Name	C Middle Name		Asche Last Name	c	ase number (if	known)	
Part	A-		Actions, Reposses	sions		ie.			
9.	With List a	in 1 year before yo	ou filed for bankruptcy, v	were you	a party in any laws	uit, court actio			ng? r custody modifications, and
	✓ 1	No Yes. Fill in the detail	ls.						
	_			Nature	of the case	Court or a	igency		Status of the case
		Case title				Court Nam	ne		Pending On appeal
		Case number				NumberSti	reet		Concluded
						City	State	Zip Code	
		Case title				Court Nam	ne		Pending On appeal
		Case number				NumberSt			Concluded
						City	State	Zip Code	
		Yes. Fill in the info	rmation below.		Describe the prop	erty		Date	Value of the property
		Creditor's Name			Explain what happ	ened			
		Number Street			_				
					Property was re	reclosed.			
		City	State Zip Cod	e	Property was garnished. Property was attached, seized, or levied.				
					Describe the prop	erty		Date	Value of the property
		Creditor's Name							
		Number Street			Explain what happ	ened			
					Property was re	reclosed.			
		City	State Zip Cod	e	Property was ga		or levied.		

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 47 of 75

Debto	or 1	Matthew First Name	C Middle Name	Asche Last Name	Case number (if known)		
			filed for bankruptcy, did an a payment because you o		ank or financial institution, s	et off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	e Zip Code				
			ed for bankruptcy, was any odian, or another official?	of your property in the p	oossession of an assignee fo	or the benefit of	creditors, a court-
	✓	No Yes					
Part 5		List Certain Gifts a				_	
13.	Wi		filed for bankruptcy, did yo	ou give any gifts with a to	otal value of more than \$600	per person?	
		Yes. Fill in the details fo					
		Gifts with a total value per person	e of more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Ga	ave the Gift				
		Number Street					
		City State Person's relationship to	•				
		Person to Whom You Ga	ave the Gift				
		Number Street					
		City State Person's relationship to	•				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 48 of 75

Deb	tor 1	Matthew First Name	C Middle Name	Asche Last Name	Case number (if known)		
11	\ \/ i+i	nin 2 years before you filed	for bankruptov did v	ou give any gifts or contribu	tions with a total value of	more than \$600 t	o any charity?
14.			i ioi baliki upicy, ulu y	ou give any gins or continua	tions with a total value of	more man \$000 t	o arry criarity:
	뇓	No	h gift or contribution				
	ш	Yes. Fill in the details for each	_	Describe what you contri	hutad	Data vau	Value
		Gifts or contributions to or that total more than \$600	cnarities	Describe what you contri	butea	Date you contributed	Value
		Charity's Name					
		Chanty's Name					
		Number Street					
		City State	Zip Code				
Part	6.	List Certain Losses					
ı aıı	ν.	Liot Gortain Locoto					
15.			or bankruptcy or sind	e you filed for bankruptcy, d	id you lose anything beca	use of theft, fire,	other disaster, or
	gam	bling?					
	✓	No					
		Yes. Fill in the details.					
		Describe the property you	lost and	Describe any insurance of		Date of your	Value of property
		how the loss occurred		Include the amount that insu		loss	lost
				pending insurance claims of A/B: Property.	in line 33 of Scriedule		
				7.12.7.1960.0			
Part	7:	List Certain Payments	or Transfers				
		at seeking bankruptcy or p de any attorneys, bankruptcy No Yes. Fill in the details.		Pescription and value of transferred		Date payment or transfer	Amount of
				transierreu		was made	payment
		Semrad Law Firm		Attorney's Fee - 350.00		10/31/2016	\$350.00
		Person Who Was Paid	_				
		Number Street					
		Number Street					
		011					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Paym	nent, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
			,				
		Email or website address					
		Person Who Made the Paym	nent, if Not You				

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 49 of 75

Debtor	1 Matthew C	Asche	Case number (if known)	
	First Name Middle Name	Last Name		
he	Fithin 1 year before you filed for bankruptcy, elp you deal with your creditors or to make ponot include any payment or transfer that you lise. No Yes. Fill in the details.	payments to your creditors?	ur behalf pay or transfer any property to an	yone who promised to
		Description and value of a transferred	ny property Date payment or transfer was made	Amount of payment
	Person Who Was Paid			
	Number Street			
	City State Zip Cod	e		
th In	lithin 2 years before you filed for bankrupto e ordinary course of your business or financlude both outright transfers and transfers made ansfers that you have already listed on this stater. No Yes. Fill in the details.	ocial affairs? e as security (such as the granting of a s		
	-	Description and value of a property transferred	Describe any property or payments received or debts printed in exchange	Date transfer was made
	Person Who Received Transfer Number Street			
	City State Zip Cod Person's relationship to you	e		
	Person Who Received Transfer Number Street			
	City State Zip Cod Person's relationship to you	e		
	lithin 10 years before you filed for bankrupt hese are often called asset-protection devices.		self-settled trust or similar device of which	you are a beneficiary?
<u></u>	No Yes. Fill in the details.			
		Description and value of	the property transferred	Date transfer was made
	Name of trust			

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 50 of 75

Debto	or 1	Matthew First Name	C Middle Name	Aso	he Name	Case	number (if known)		
Part 8	3:	List Certain Financia				es, and	l Storage Units		
20.	With mov	nin 1 year before you filed red, or transferred? Ide checking, savings, mon- peratives, associations, and	d for bankruptcy, wer	e any financia	l accounts or ins	ruments he	eld in your name, or fo	-	
		No Yes. Fill in the details.		Last 4 digi number	ts of account	Type of instrum	account or nent	Date account was closed, sold, moved, or	Last balance before closing or transfer
		Person Who Was Paid Number Street		XXXX-		Sav	ecking rings ney market kerage er	transferred	
		Person Who Was Paid Number Street	Zip Code	XXXX-		Sav	ecking rings ney market kerage er		
		City State you now have, or did you er valuables? No Yes. Fill in the details.	Zip Code have within 1 year b	efore you filed	for bankruptcy, a	ny safe de _l	posit box or other dep	ository for secur	ities, cash, or
,				Who else ha	d access to it?		Describe the conte	nts	Do you still have it?
		Name of Financial Institut Number Street City State	Zip Code	Name Number Str City	eet State Zi	o Code			☐ No ☐ Yes
22.		e you stored property in a No Yes. Fill in the details.	a storage unit or plac	e other than y	our home within	1 year befo	ore you filed for bankr	uptcy?	
,				Who else ha	d access to it?		Describe the conte	nts	Do you still have it?
		Name of Storage Facility		Name					☐ No ☐ Yes
		Number Street		Number Str City	eet State Zi) Code			_
		City State	Zip Code						

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 51 of 75

ebtor	r 1 Matthew C	A	NI			
	First Name Middle Name	L	ast Name			
rt 9:	Identify Property You Hold or Conf	rol for Som	eone Else			
	, , ,					
. D	Oo you hold or control any property that some	one else owns	? Include any	property you b	orrowed from, are storing for, or hold in	n trust for
S	omeone.					
	✓ No					
Ľ	Yes. Fill in the details.					
_	Tes. Fill III the details.					
		Where is t	he property?		Describe the contents	Value
	-					
	Owner's Name	Number Str	eet			
	Number Street					
	Number Street					
		C:t-	Ctata	7:- Cada		
		City	State	Zip Code		
	City State Zip Code					
ırt 10	0: Give Details About Environmenta	I Information	n			
or the	e purpose of Part 10, the following definitions appl	v:				
		•				
•	Environmental law means any federal, state, or l					
	hazardous or toxic substances, wastes, or mater	•				
	including statutes or regulations controlling the o	leanup of these	substances, v	vastes, or materia	āl.	
	Site means any location, facility, or property as de	fined under any	environmental	law, whether you	now own, operate, or utilize it	
	or used to own, operate, or utilize it, including dis	sposal sites.				
	Hazardous material means anything an environm	ontal law define	e ac a bazarda	ue waeta hazard	ous substance	
•	Hazardous material means anything an environm			us waste, hazard	ous substance,	
	toxic substance, hazardous material, pollutant, c	ontaminant, or s	imilar term.		ous substance,	
	, ,	ontaminant, or s	imilar term.		ous substance,	
	toxic substance, hazardous material, pollutant, c	ontaminant, or s	imilar term.		ous substance,	
eport	toxic substance, hazardous material, pollutant, c	ontaminant, or s	imilar term. rdless of when	they occurred.		
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you	ontaminant, or s	imilar term. rdless of when	they occurred.		
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have the same proceedings.	ontaminant, or s	imilar term. rdless of when	they occurred.		
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you	ontaminant, or s now about, regal ou may be liabl	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have the same proceedings.	ontaminant, or s	imilar term. rdless of when le or potentia	they occurred.		Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have the same proceedings.	ontaminant, or s now about, regal ou may be liabl	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices, releases, and proceedings that you know that you have tall notices, releases, and proceedings that you know that you have tall notices, releases, and proceedings that you know that you have tall notices.	ontaminant, or s now about, regar ou may be liabl Governme	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or all notices, releases, and proceedings that you know any governmental unit notified you that you have the same proceedings.	ontaminant, or s now about, regal ou may be liabl	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices. Place any governmental unit notified you that you have tall notices, releases, and proceedings that you know that you have tall notices, releases, and proceedings that you know that you have tall notices, releases, and proceedings that you know that you have tall notices.	ontaminant, or s now about, regar ou may be liabl Governme	cimilar term. rdless of when the or potentian the or potentian the control of th	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have the proceedings. No Yes. Fill in the details.	contaminant, or so now about, regarded to may be liable Governmen	cimilar term. rdless of when the or potentian the or potentian the control of th	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have the proceedings. No Yes. Fill in the details.	Governmen Number Streen	imilar term. rdless of when le or potentia ental unit etal unit	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have the proceedings. No Yes. Fill in the details.	contaminant, or so now about, regarded to may be liable Governmen	cimilar term. rdless of when the or potentian the or potentian the control of th	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have the proceedings. No Yes. Fill in the details.	Governmen Number Streen	imilar term. rdless of when le or potentia ental unit etal unit	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, control and notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance. No Yes. Fill in the details. Name of site Number Street City State Zip Code	Governme Governme Number Street	rdless of when the or potential unit the et State	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, control and notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance. No Yes. Fill in the details. Name of site Number Street	Governme Governme Number Street	rdless of when the or potential unit the et State	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, control and notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site. Number Street City State Zip Code. Have you notified any governmental unit of any control and site.	Governme Governme Number Street	rdless of when the or potential unit the et State	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, releases, and proceedings that you know that you have any governmental unit notified you that you have you state. No Name of site Number Street City State Zip Code Have you notified any governmental unit of any polycome.	Governme Governme Number Street	rdless of when the or potential unit the et State	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, control and notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site. Number Street City State Zip Code. Have you notified any governmental unit of any control and site.	Government Structure Struc	imilar term. rdless of when le or potentia ental unit etal unit eet State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, releases, and proceedings that you know that you have any governmental unit notified you that you have you state. No Name of site Number Street City State Zip Code Have you notified any governmental unit of any polycome.	Governme Governme Number Street	imilar term. rdless of when le or potentia ental unit etal unit eet State	they occurred.	or in violation of an environmental law?	Date of notice
eport	toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, releases, and proceedings that you know that you have any governmental unit notified you that you have you state. No Name of site Number Street City State Zip Code Have you notified any governmental unit of any polycome.	Government Structure Struc	imilar term. rdless of when le or potentia ental unit etal unit eet State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of the proceedings that you know that you have a substance of the proceedings that you have you that you have you for the proceedings that you have you that you have you have you notified any governmental unit of any yes. Fill in the details.	Government	ental unit State State State State State State State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, hazardous material, pollutant, control toxic substance, releases, and proceedings that you know that you have any governmental unit notified you that you have you state. No Name of site Number Street City State Zip Code Have you notified any governmental unit of any polycome.	Government Structure Struc	ental unit State State State State State State State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Have you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Governmen Governmen Governmen	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of the proceedings that you know that you have a substance of the proceedings that you have you that you have you for the proceedings that you have you that you have you have you notified any governmental unit of any yes. Fill in the details.	Government	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Have you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Number Stru Governmen Number Stru Governmen	ental unit State	zip Code	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Have you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Governmen Governmen Governmen	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
H V	toxic substance, hazardous material, pollutant, or tall notices, releases, and proceedings that you know that any governmental unit notified you that you have a substance of site. Name of site Number Street City State Zip Code Have you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Number Stru Governmen Number Stru Governmen	ental unit State	zip Code	or in violation of an environmental law? Environmental law, if you know it	Date of notice

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 52 of 75

Deb	tor 1	Matthew		С	Asche	Case	number (if known)	
		First Name		Middle Name	Last Name			
		_						
26.	Hav	e you been a party	/ in any judio	cial or administra	ative proceeding under	any environmenta	al law? Include settlements and order	s.
		NI-						
		No						
	Ш	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					,			case
		Coop title						33.33
		Case title						Pending
					Court Name	-		
								On appeal
		Case number			Number Street			
		OddC HarribCi						Concluded
								-
					City State	Zip Code		
		l.,						
Part	t 11:	Give Details A	bout Your	Business or	Connections to Ar	ny Business		
27.	Witl	hin 4 years before	you filed for	bankruptcy, did	you own a business or	have any of the fo	ollowing connections to any business	?
		•		, ,	•	•	,	
		A sole propriet	tor or self-em	ployed in a trade,	profession, or other activit	ty, either full-time o	r part-time	
					or limited liability partner		•	
				ity company (LLC)	or inflited liability partities	SHIP (LLF)		
		A partner in a	partnership					
		An officer, dire	ctor, or mana	aging executive of	a corporation			
					securities of a corporation	nn.		
		Allowner or at	lieast 5 /6 Oi t	ine voling or equity	secuniles of a corporation	л і		
		No. None of the abo	nve annlies G	o to Part 12				
	¥							
	Ш	Yes. Check all that a	apply above a	and fill in the details	s below for each business	i.		
					Describe the natu	re of the busines	s Employer Identification n	umber Do not
							include Social Security nu	
		Business Name			_		EIN:	
		Business Name						
							Datas hardens a salata d	
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe	r	
		O:t	Ctata	7:- CI-	_		From To	
		City	State	Zip Code				
					Describe the natu	ire of the busines		
							include Social Security nu	umber or ITIN.
							EIN:	
		Business Name			_		EIIV.	
		N 1 6					Dates business existed	
		Number Street			Name of account	ant or hookkoope		
					ivallie of account	ant or bookkeepe		
		City	State	Zip Code			From To	
		,	2.3.0	_ip 0000				
					D 11		- Farming the difference of	l D (
					Describe the natu	ire of the busines		
							include Social Security nu	umper or IIIN.
							EIN:	
		Business Name			_			
		Number Office			_		Dates business existed	
		Number Street			Name of account	ant or bookkeene		
					ramo or account	and or bookkeepe		
		City	State	Zip Code			From To	
		J.1.,	Ciaio	p 0000				-

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 53 of 75

Debtor	1 Matthew		С	Asche	Case number (if known)					
	First Name		Middle Name	Last Name						
	8. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.									
	✓ No Yes. Fill i	n the details below.								
				Date issued						
	Name			MM/DD/YYYY						
	Numbe	r Street		_						
	rambe	o o o o o o								
	City	State	Zip Code	<u> </u>						
	_		,							
Part 1	2: Sign E	Below								
tru	ie and corre nkruptcy ca	ect. I understand that use can result in fines	making a false sta	tement, concealing propert	nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
	5	(s/ Matthew Aso	che		×					
		Signature of Debto			Signature of Debtor 2					
		Date 10/31/2016			Date					
Die	d you attacl	n additional pages to	Your Statement of	Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?					
I.	No									
	Yes									
	165									
Die	d you pay o	r agree to pay some	one who is not an at	ttorney to help you fill out b	ankruptcy forms?					
✓	No									
Ė	Yes. Name	e of person			Attach the Bankruptcy Petition Preparer's Notice,					
_	-	•			Declaration, and Signature (Official Form 119).					

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 54 of 75

	latthew		С	Asche	Case number (if known)	
Fi	irst Name		Middle Name	Last Name		
Α	dditional Pa	ge				
j th	e last 3 years, h	nave you liv	ed anywhere oth	er than where you live now	?	
ſ	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
					Same as Debtor 1	Same as Debtor 1
8	316 greenwood	circle #212		From 07/0040		— Гтот
1	Number Street			From <u>07/2013</u>	Number Street	From
_				To <u>07/2014</u>		
	Naperville	Illinois	60563			_
_	City	State	Zip Code		City State Zip Code	
					Same as Debtor 1	Same as Debtor 1
_	Number Street			From	Number Street	From
•	Varibor Otroct			To	Number edget	To
						_
_	City	State	Zip Code		City State Zip Code	
					Same as Debtor 1	Same as Debtor 1
1	Number Street			From	Number Street	From
٠	variber offect			To	Number Street	To
-						
(City	State	Zip Code		City State Zip Code	_
					Same as Debtor 1	Same as Debtor 1
-	Number Street			From	Number Street	From
	Varibor Otroct			To	Number edget	To
_						_
(City	State	Zip Code		City State Zip Code	_
					Same as Debtor 1	Same as Debtor 1
1	Number Street			From	Number Street	From
·				To	. tanibo. Calcat	To
_						
(City	State	Zip Code		City State Zip Code	_
					Same as Debtor 1	Same as Debtor 1
1	Number Street			From	Number Street	From
_				To		To
(City	State	Zip Code		City State Zip Code	_

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 55 of 75

B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Matthew C Asche	Case No.	
-	Debtor		(If known)
		Chapter	Chapter 13
	DISCLOSURE OF COMPENSAT	TION OF ATTORNEY FOR	RDEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 that compensation paid to me within one year before the services rendered or to be rendered on behalf of the del is as follows:	e filing of the petition in bankruptcy, or agr	eed to be paid to me, for
	For legal services, I have agreed to accept		\$4,000.00
	Prior to the filing of this statement I have received		\$350.00
	Balance Due		\$3,650.00
2.	The source of the compensation paid to me was:		
	Debtor Other (s	specify)	
3.	The source of the compensation paid to me is:		
	Debtor Other (s	specify)	
4.	I have not agreed to share the above-disclosed commembers and associates of my law firm.	npensation with any other person unless th	ney are
	I have agreed to share the above-disclosed compen members or associates of my law firm. A copy of the people sharing in the compensation, is attached.	ne agreement, together with a list of the n	
5.	In return for the above-disclosed fee, I have agreed to r a. Analysis of the debtor's financial situation, and re bankruptcy;		
	b. Preparation and filing of any petition, schedules,	statements of affairs and plan which may	be required;
	c. Representation of the debtor at the meeting of cr	editors and confirmation hearing, and any	adjourned hearings thereof;
	d. Representation of the debtor in adversary proceed	edings and other contested bankruptcy ma	itters;
6.	By agreement with the debtor(s), the above-disclosed fe	ee does not include the following services:	
	CER	TIFICATION	
	certify that the foregoing is a complete statement of any ne debtor(s) in this bankruptcy proceedings.	agreement or arrangement for payment t	to me for representation
	10/31/2016	/s/ Mary E.R. Walters	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

		Northern District o	oi illinois	
re	Matthew C Asche		Case No.	
u .	Debtor		Chapter	(If known) Chapter 13
				· · · · · · · · · · · · · · · · · · ·
	DISCLOSURE OF	COMPENSATION	OF ATTORNEY F	OR DEBTOR
com	pensation paid to me within one	Fed. Bankr. P. 2016(b), I certify the year before the filing of the peting of the debtor(s) in contemplation	ition in bankruptcy, or agreed to	o be paid to me, for services
For	legal services, I have agreed to a	ccept		\$4,000.00
Prio	r to the filing of this statement I	have received		\$350.0
Bala	ance Due			\$3,650.0
2. The	source of the compensation pai	d to me was:		
•	✓ Debtor	Other (specify)		
3. The	source of the compensation pa	id to me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the a members and associates of my	bove-disclosed compensation w law firm.	rith any other person unless the	ey are
	I have agreed to share the abov members or associates of my la the people sharing in the comp	e-disclosed compensation with a w firm. A copy of the agreement, ensation, is attached.	a other person or persons who , together with a list of the nam	are not es of
5. in re	eturn for the above-disclosed fe a. Analysis of the debtor's fina bankruptcy;	e, I have agreed to render legal se ncial situation, and rendering ad	ervice for all aspects of the banl vice to the debtor in determinin	kruptcy case, including: ng whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statements	of affairs and plan which may l	be required;
	c. Representation of the debto	r at the meeting of creditors and	confirmation hearing, and any	adjourned hearings thereof;
	d. Representation of the debto	r in adversary proceedings and c	other contested bankruptcy mat	iters;
6. By a	agreement with the debtor(s), the	e above-disclosed fee does not it	ndude the following services:	
	- -	CERTIFICAT	ION	
l certi debtor(s)	ify that the foregoing is a compl in this bankruptcy proceedings	ete statement of any agreement o	or arrangement for payment to I	me for representation of the
	10/31/2016		/s/ Mary E.R. Walters	
*····	Date		Signature of Attorney	
			Semrad Law Firm	·
			Name of law firm	



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 59 of 75

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that dient is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filling, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$387.00



Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 61 of 75

3. Befor	re signing this agreement, the attorney has re	ceived,	\$350.00)
tow	ard the flat fee, leaving a balance due of \$3,65	0.00 ar	nd \$77.00) for expenses,
	ing a balance due of \$4,037.00			

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	10/31/2016	
Signed	! .	1/2
/s/ Mat	thew Asche	
Debtor	(s)	

s/ Mary E.R. Walters

Attorney for Debtor(s

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

-	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 66 of 75

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Asche, Matthew C	Case No		
_	Debtor(s)	0000110.		
		Chapter.	Chapter13	
	VERIFICATION	OF CREDITOR MA	TRIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is tru	e and correct to the best of their know	/ledg
Doto	40/04/0046	/a/ Aceka Matt	C	
Date:	10/31/2016	/s/ Asche, Mattl		
		Asche, Matthew Signature of De		

FORD MOTOR CREDIT PO BOX BOX 542000 OMAHA, NE 68154

Bank of America, NA P.O. Box 15026 Wilmington , DE 19801

CHASE CARD PO BOX 15298 WILMINGTON , DE 19850

CHASE CARD PO BOX 15298 WILMINGTON , DE 19850

Bank of America, NA P.O. Box 15026 Wilmington , DE 19801

Bank of America, NA P.O. Box 15026 Wilmington, DE 19801

SYNCB/CCARE1 C/O PO BOX 965036 Orlando , FL 32896

SYNCB/CARCARE ONE C/O PO BOX 965036 ORLANDO , FL 32896

CAPITAL ONE BANK (USA), N.A. PO Box 71083 c/o Ashley Boswell Charlotte, NC 28272

CAPITAL ONE Po Box 85015 Richmond , VA 23285

MOHELA/DEPT OF ED 633 SPIRIT DR CHESTERFIELD, MT 63005 MOHELA/DEPT OF ED 633 SPIRIT DR CHESTERFIELD, MT 63005

US Dept. of Education 121 S 13th Street Suite 201 c/o Lynne Benson Lincoln , NE 68508

JARED 375 Ghent Road Akron, OH 44333

Bank of America, NA P.O. Box 15026 Wilmington, DE 19801

US Dept. of Education 121 S 13th Street Suite 201 c/o Lynne Benson Lincoln , NE 68508

WFDS PO BOX 19657 IRVINE , CA 92623

Bank of America, NA P.O. Box 15026 Wilmington , DE 19801

ONEADVANTAGE 7650 Magna Drive Belleville, IL 62223

FIRSTSOURCE ADVANTAGE 1232 W STATE RD #2 LA PORTE , IN 46350

MERCHANTS CR 223 W JACKSON ST SUITE 900 CHICAGO , IL 60606

JARED-GALLERIA OF JWLR PO Box 3680 Akron , OH 44309 US Dept. of Education 121 S 13th Street Suite 201 c/o Lynne Benson Lincoln , NE 68508

American Family Insurance Group 6000 American Parkway Madison , WI 53777

Illinois Secretary of State Safety and Financial 2701 S Dirksen Pkwy Springfield , IL 62723

Illinois Secretary of State Safety and Financial 2701 S Dirksen Pkwy Springfield , IL 62723

AT&t Uverse PO Box 64794 Saint Paul , MN 55164 Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 70 of 75

Debtor 1 Matthew			ase number (if known)	_
First Name		ast Name		
Part 6: Answer These Que 16. What kind of debts do you have?	"incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily	primarily for a personal, for a personal p	umer debts are defined in 11 U.S.C. § 101(8) as amily, or household purpose." ss debts are debts that you incurred to obtain operation of the business or investment. mer debts or business debts.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fu	7. Do you estimate that afte	er any exempt property is excluded and administrative ribute to unsecured creditors?	a punca kayun
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	H18211100
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001-	\$1,000,000,001-\$10 billion \$1,000,000,001-\$50 billion \$10,000,000,001-\$50 billion	obnoste sven
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001-	\$50 million	
Part 7: Sign Below	I have examined this petition, ar	nd I declare under penalty	of perjury that the information provided is true and	_
For you	correct. If I have chosen to file under Chof title 11, United States Code. under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state connection with a bankruptcy oboth. 18 U.S.C. §§ 152, 1341,	napter 7, I am aware that I I understand the relief averaged I did not pay or agree to ned and read the notice reth the chapter of title 11, tement, concealing properties can result in fines up	may proceed, if eligible, under Chapter 7, 11,12, or allable under each chapter, and I choose to proceed pay someone who is not an attorney to help me fill	13
	/s/ Matthew Asche Signature of Debtor 1	MUL	Signature of Debtor 2	
	Executed on10/31/2016		Executed on	

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 71 of 75

			_		
Fill in this infor	mation to identify your c	ase:		,	
Debtor 1	Matthew	С	Asche	·	
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse, if filing)	5	Middle Name	Last Name		
(Spocse, II IIIIIg)	First Name	Middle Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	—	
Case number			(Oldic)	<u> </u>	
(If known)				Check if th	ie ie s
Official	Form 106De	.c		amended f	
Official	TOTTI TOODE	,C			
Declarat	tion About an	Individual Deb	tor's Schedules	S	12/1
If two married	neonle are filing togeth	er, both are equally resp	onsible for supplying corre	ct information.	
					a
You must file t	this form whenever you t erty by fraud in connect	nie pankruptcy schedule ion with a bankruptcy ca	s or amended schedules. In ase can result in fines up to	laking a false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or both. 18	
U.S.C. §§ 152,	1341, 1519, and 3571.				
o:	DI			•	
Part 1: Sign	n Below		to the transfer of the second		
Did you p	oay or agree to pay some	eone who is NOT an atto	rney to help you fill out ban	kruptcy forms?	
			Attack Berlin adam	Detting Desperada Matica Dealerstics and	
Yes.	Name of person		Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119).	
L WARRANT TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO T			•		
***************************************	*				
designation					
		re that I have read the s	ımmary and schedules filed	l with this declaration and	
that they	y are true and correct.				
🗶 /s/ Mati	thew Asche	<u>/</u>	*		

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

Date 10/31/2016

MM/DD/YYYY

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 72 of 75

Debtor	1 Matthew		С	Asche	Case number (ifknown)
	First Name		Middle Name	Last Name	I ANDER TO THE FORM FOR THE FORM AND THE FOR
28. W	reditors, or o	s before you filed for other parties. In the details below.	bankruptcy, did y	regerial del decenio del reger	ement to anyone about your business? Include all financial institutions,
				Date issued	
	Name			MM/DD/YYYY	
	Number	Street			
	City	State	Zip Code	_	
Part 12	2: Sign Be	low			
+	a and carro	ct. I understand that ase can result in fin	making a false stee sup to \$250,000	latement, concealing or	chments, and I declare under penalty of perjury that the answers are operty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debto			Signature of Debtor 2
		_			Date
		Date 10/31/2016			
Dic	l you attach	additional pages to	Your Statement	of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?
V	No				
L	Yes				
Dio	d you pay or	agree to pay someo	ne who is not an a	attorney to help you fill	out bankruptcy forms?
☑	No				Attack the Bealminton Potition Property Nation
	Yes. Name	of person			Attach the Bankruptcy Petition Preparer's Notice,

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 73 of 75

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Asche, Matthew C Debtor(s)	Case No	
		Chapter.	Chapter13
	VERIFIC	ATION OF CREDITOR MAT	RIX
Th knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is tr	ue and correct to the best of their
Date:	10/31/2016	/s/ Asche, Matthe Asche, Matthew Signature of Deb	C

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 74 of 75

Debto	r 1 Matthew	C	Asche Last Name	Case number (if known)	
	First Name	Middle Name		namentemperatususususususususususususususususususus	***************************************
16.	Calculate the median fan	nily income that applies to	you. Follow these steps	X.	200
	16a. Fill in the state in whic	-	Illinois		
	16b. Fill in the number of p	eople in your household.	<u>1</u>		#40.741.00
	household	ily income for your state and and in the separate instructions	To find	d a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office.	<u>\$49,741.00</u>
17.	How do the lines compar	e?		•	
	17a. Line 15b is less t under 11 U.S.C.	han or equal to line 16c. On t <i>§ 1325(b)(3)</i> . Go to Part 3. l	the top of page 1 of this Do NOT fill out <i>Calculati</i>	form, check box 1, <i>Disposable income is not determined</i> ion of Disposable Income (Official Form 122C-2).	
	U.S.C. § 1325(b)	than line 16c. On the top of 6(3). Go to Part 3 and fill ou current monthly income from	t Calculation of Dispos	eck box 2, <i>Disposable income is determined under 11</i> sable Income (Official Form 122C-2). On line 39 of that	
Part	Calculate Your Co	mmitment Period Unde	r 11 U.S.C. §1325(b)(4)	
18.	Copy your total average	monthly income from line 1	11.	·	\$4,979.85
19.	Deduct the marital adjust commitment period under	stment if it applies. If you ar 11 U.S.C. § 1325(b)(4) allow	re married, your spouse is you to deduct part of	is not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13.	
		ent does not apply, fill in 0 or			-\$0.00
					\$4,979.85
20	19b. Subtract line 19a fr	om time to. nonthly income for the year	. Follow these steps:		
2.0.		ionally income to: and year			\$4,979.85
	20a. Copy line 19b.	umber of months in a year).		•	x 12
					\$59,758.20
	20b. The result is your cur	rent monthly income for the y	year for this part of the 10	orm.	
	20c. Copy the median fam	nily income for your state and	size of household from	line 16c	\$49,741.00
21.	How do the lines compa				
		line 20c. Unless otherwise ord 3 years. Go to Part 4.	dered by the court, on the	ne top of page 1 of this form, check box 3, The	
		or equal to line 20c. Unless period is 5 years. Go to Part 4		e court, on the top of page 1 of this form, check box	
Part	4: Sign Below				
The state of the s	By signing here, I dec			his statement and in any attachments is true and correct.	
91000	Signature of Debt	tor 1	_	Signature of Debtor 2	
-	Date 10/31/201 MM/DD/Y			Date MM/DD/YYYY	
CONTRACTOR MANAGEMENT (AND ALL CONTRACTOR CO	If you checked 17a, of the state of the stat	lo NOT fill out or file Form 12 ill out Form 122C-2 and file i	2C-2. t with this form. On line	39 of that form, copy your current monthly income from li	ne 14

Case 16-34805 Doc 1 Filed 10/31/16 Entered 10/31/16 16:38:44 Desc Main Document Page 75 of 75

Debtor	Matthew First Name	C Middle Name	Asche Last Name	Case number (fknown)
Part 4:		anominana mamairris respondencia accidentalment	namenta di manana manana di ma	
By sig	ning here under penalty of perjur	y you declare that the infor	*	d in any attachments is true and correct.
Sigi	nature of Debtor 1			e of Debtor 2
Dat	e MM/DD/YYYY		Date _ M	M/DD/YYYY